

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE  |
|---------------------------|----------|--------|-------|
| FEE DETERMINATION         |          |        |       |
| O.I.P.E. CLASSIFIER       |          |        |       |
| FORMALITY REVIEW          |          |        |       |
| RESPONSE FORMALITY REVIEW |          | 61800  | 12-21 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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